

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**or Fax (703) 746-4000**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

10/07/2004

MICHAEL L GOLDMAN

~~NIXON HARGRAVE DEVANS AND DOYLE~~ Nixon Peabody LLP

CLINTON SQUARE

P O BOX 31051

ROCHESTER, NY 14603-1051

Adjustment date: 12/14/2004 MWOLDGE2  
 03/26/2004 MBERHE1 00000161 08794851  
 01 FC:1501

-1330.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Janice Bowers

(Depositor's name)

*Janice Bowers*

(Signature)

December 10, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/794,851	02/04/1997	FRANCIS BARANY	19603/468 (CRF D-1595C)	7129

TITLE OF INVENTION: DETECTION OF NUCLEIC ACID SEQUENCE DIFFERENCES USING THE LIGASE DETECTION REACTION WITH ADDRESSABLE ARRAYS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
-------------	--------------	-----------	-----------------	------------------	----------

nonprovisional

NO

\$1370

\$0

\$1370

01/07/2005

08794851

EXAMINER	ART UNIT	CLASS-SUBCLASS
----------	----------	----------------

PONNALURI, PADMASHRI

1639

435-006000

12/14/2004 MWOLDGE2 00000034 141138  
 01 FC:1501 70.00 DA 1330.00 OP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Nixon Peabody LLP

2

3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SEE ATTACHMENT TO FORM PTOL-85B (attached)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

## 4a. The following fee(s) are enclosed:

☐ Issue Fee previously paid 3/23/04☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies 10 (previously paid 3/23/04)

## 4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 14-1138 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

\* The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Michael L. Goldman*

Date

December 10, 2004

Typed or printed name

Michael L. Goldman

Registration No.

30,727

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



Serial No. 08/794,851  
19603/468 (CRF D-1595C)

**ATTACHMENT TO FORM PTOL-85B  
ISSUE FEE TRANSMITTAL FORM**

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE  
PATENT**

**(A) NAME OF ASSIGNEE**

Cornell Research Foundation, Inc.

**(B) RESIDENCE (CITY & STATE OR COUNTRY)**

Ithaca, New York

☒ corporation or other private group entity

**(A) NAME OF ASSIGNEE**

Board of Supervisors of Louisiana State University and  
Agricultural and Mechanical College

**(B) RESIDENCE (CITY & STATE OR COUNTRY)**

Baton Rouge, Louisiana

☒ corporation or other private group entity

**(A) NAME OF ASSIGNEE**

Regents of the University of Minnesota

**(B) RESIDENCE (CITY & STATE OR COUNTRY)**

Minneapolis, Minnesota

☒ corporation or other private group entity